

UNUSUAL SUBJECTIVE REACTION FOLLOWING DI-HYDROSTREPTOMYCIN*

REPORT OF SEVEN CASES

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In recent months seven patients attending venereal diseases clinics in the Manchester area have complained of an unusual reaction following the intramuscular injection of di-hydrostreptomycin. In each case the patient had numbness, tingling, and a flushing sensation of the face, a few minutes to 6 hours after the injection.

Case Reports

Case 1, a male aged 29 years with non-gonococcal urethritis, was given two tablets "Sulphatriad" three times a day for 5 days and 1 g. di-hydrostreptomycin on November 25, 1958. He re-attended 13 days later and stated that about 6 hours after the injection he had developed flushing and tingling of the face which lasted for 2 days. He had discontinued the "Sulphatriad" tablets as he thought that the symptoms were due to them. He was advised to take the remaining "Sulphatriad" (a total of eighteen tablets) and, as the facial symptoms did not recur, it was concluded that they had resulted from the di-hydrostreptomycin. There was no previous history of di-hydrostreptomycin injections.

Case 2, a housewife aged 25 years with acute gonorrhoea and a Bartholin's abscess, was given di-hydrostreptomycin 1 g. daily for 5 days on December 10, 1958. A few hours after the fourth injection she developed swelling and tingling of the face. There was no previous history of di-hydrostreptomycin injections.

Case 3, a housewife aged 26 years with acute gonorrhoea was given di-hydrostreptomycin 1 g. daily for 2 days on January 6, 1959. Immediately after the second injection on January 7, the patient stated that she had developed tingling and slight swelling of the face about 6 hours after the first injection. Antistin 100 mg. was immediately given and continued for 3 days in an effort to prevent a recurrence of the facial

symptoms. On January 15, 1959, the patient stated that she developed similar symptoms to the above, about 6 hours after the second injection but did not think they were as severe as those following the first injection. The patient had several attacks of *B. coli* pyelitis from 1954 to 1956, and hypoplasia of the left kidney, and was awaiting nephrectomy. There was no previous history of di-hydrostreptomycin injections.

Case 4, a man aged 20 years with non-gonococcal urethritis, was given di-hydrostreptomycin 1 g. daily for 3 days on May 7, 1959. He re-attended 4 days later and stated that he had developed tingling and numbness of the face about 6 hours after each injection. When he looked in the mirror during each attack his face had appeared to be normal. His urine contained no albumen. There was no previous history of di-hydrostreptomycin injections.

Case 5, a man aged 26 years with non-gonococcal urethritis, was given 1 g. di-hydrostreptomycin on May 21, 1959. On questioning 7 days later, he stated that tingling and numbness of the face occurred about 2 hours after the injection. He further stated that he had noticed a similar reaction about 4 months previously when he had been treated for non-gonococcal urethritis with di-hydrostreptomycin, but he had not associated the reaction with the injection and had not mentioned it at the time.

Case 6, a housewife aged 28 years with non-specific cervicitis was given di-hydrostreptomycin 1 g. daily for 2 days on May 26, 1959. The next day she stated that tingling, numbness, and a throbbing sensation of the face, ears, and tongue had developed about 3 hours after the injection. It was decided to give the patient an antihistamine orally before the second injection in an effort to prevent the occurrence of a similar reaction. However, the patient stated that she was already taking an antihistamine orally for hay fever and produced "Histryl Spansule", a long-acting

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antihistamine, from her handbag to support her statement. In view of this it was decided to discontinue di-hydrostreptomycin; oral Terramycin was substituted, and no further facial symptoms developed. Her urine contained no albumen and the blood urea was 36 mg./100 ml. There was no previous history of streptomycin injections.

Case 7, a man aged 39 years with non-gonococcal urethritis, was given 1. g. di-hydrostreptomycin on September 3, 1959. About 10 minutes later he experienced tingling with sweating over the face, and also vomited once. These symptoms cleared up in 1 hour. During the previous 11 months he had been given individual injections of 1. g. streptomycin for earlier attacks of non-gonococcal urethritis without incident.

Discussion

Six patients volunteered the information that they noticed a reaction after the di-hydrostreptomycin injections. Case 5 mentioned the reaction only on questioning regarding any side-effects following the injection. Case 6 had already been taking a long acting oral antihistamine daily for 2 weeks before the injection, but notwithstanding, developed a reaction after di-hydrostreptomycin. Case 3 was given an antihistamine ("Antistin") a few seconds after the second injection of di-hydrostreptomycin but nevertheless developed a reaction 6 hours later. It is unlikely that these reactions are allergic in origin as antihistamines did not prevent their occurrence.

Edward and Whyte (1959) reported five patients with permanent vestibular damage due to streptomycin, all of whom had evidence of renal failure. One of the present series of cases (Case 3) had a history suggestive of renal impairment. It would not appear that the development of these facial symptoms is a contraindication to further di-hydrostreptomycin therapy.

Summary

Seven cases are reported, in which tingling, numbness, and flushing of the face occurred after the injection of small quantities of di-hydrostreptomycin.

REFERENCE

Edwards, K. D. G., and Whyte, H. M., (1959). *Brit. med. J.*, 1, 752.

ADDENDUM

Since this paper was submitted for publication, five further patients have been seen in the Manchester area, in whom a reaction similar to the above has occurred after injections of di-hydrostreptomycin.

Résumé

On signale sept cas de fourmillement, torpeur et rougeur du visage après l'injection de petites quantités de di-hydrostreptomycine.